NAY 1 6 2005 73

.18/609169

PTO/SB/06 (12-04)

Approved for use through 7/31/2006. CMB 0651-0032

U.S. Patent end Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwell Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. TRAD BAYENT APPLICATION FEE DETERMINATION RECORD Application of Docket Number Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE (S) FEE (\$) RATE (\$) BASIC FEE FEE (\$) N/A (37 CFR 1.16(e), (b), or (c)) N/A NA SEARCH FEE N/A (37 CFR 1.1600), (7), or (m)) N/A N/A N/A **EXAMINATION FEE** N/A (37 CFR 1.16(a), (p), or (q)) NA N/A TOTAL CLAIMS (37 CFR 1.16(i)) minus 20 = × OR INDEPENDENT CLAIMS (37 CFR 1.16(h)) minus 3 = = **E** If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 CFR 1.16(a)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(i)) N/A N/A If the difference in column 1 is less than zero, enter '0 in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN (Column 2) OR (Column 1) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS (IGHES) REMAINING PRESENT NUMBER RATE (\$) ADDI RATE (\$) AFTER PREVIOUSLY **EXTRA** ENT TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) Total Minus (37 CFR 1.160) IENDMI ס 25: 50 OR X Minus 100= 200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(i)) N/A OR NA TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER  $\emptyset$ REMAINING PRESENT  $\mathbf{\alpha}$ RATE (\$) ADDI-RATE (S) ADOL **AFTER EXTRA** PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE (\$) FEE (\$) C Minus 2 ENDM (37 CFR 1.180) OR Independent (37 CFR 1.16(h)) Miros U 2 OR Application Size Fee (37 CFR 1,16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j)) NA OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0 in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.

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